



Checking in: A Behavioral Health Size-Up

Episode 5: Clinical Support

Graham Limb

It is a special day for me. The 1st of November, 2016 and exactly 10 years ago at 1:50 in the morning, 2006, I was a firefighter and I was called out to a fire. Persons reported attending that fire and I didn't realize it was actually a murder of a father who had killed his wife and his four children. Yeah, no, it is now made me well, I suppose the person I am now. I have depression and I suffer from post-traumatic stress disorder. My time in the fire service ended six months later and yeah, I'll never get over it. I know now that I couldn't do anymore. They was already dead. But that doesn't stop the fight, the guilty feeling, the helplessness of not being able to get them. Firefighters, well certainly me, I joined up to make a difference, to be a hero and I was no hero that day. I'm just outside a cemetery in Akrontine in Lancashire where the little angels are laid to rest. I know call once a year, which is today, to just lay a couple of roses on each grave. It's never any easier. Never.

Craig Leucke

Checking In: A Behavioral Health Size-Up. This podcast is brought to you by the National Fallen Firefighters Foundation with funding by the U.S. Department of Homeland Security's Federal Emergency Management Agency's Fire Prevention and Safety Award program. For more information about the National Fallen Firefighters Foundation, please visit everyonegoeshome.org or firehero.org. If you or someone you know is in need of immediate support, please call the National Suicide Prevention Lifeline at 1-800-273-TALK. That's 1-800-273-8255. Welcome everyone to episode five of our podcast, Checking In. I'm Craig Leucke. Thank you for joining. I'd like to thank Graham Limb from Akrontine, which is just outside Manchester, England for allowing us to share his story. What a horrific situation to have to deal with. If you want to contact Graham, his email is GZLimb@hotmail.com. On this episode, we're going to focus on clinical support, but before we get to our expert panel, I'd like to welcome our guest, Scott Heiss. He's a division chief of safety and training with the Denver Fire Department. Chief, I understand that you've created a wellness center within the department that also includes behavioral health.

Scott Heiss

Well, I'd like to say I created it, but it was a lot of people. It was a collaboration. It was a collaboration of many entities that we do have a good wellness program. We have a physical therapy wellness center that's within our training center that we have two full-time physical therapists and we have incorporated behavioral health within our wellness program. And what we started off with was a physical wellness program, but now we call it a total wellness program with the incorporation of what we now call performance psychology.

Craig Leucke

So, what is the behavioral section? What do they handle within the department?

Scott Heiss

Well, the behavioral part, we've been working on behavioral health for three years. We don't have a dedicated behavioral health wellness coordinator yet, but we're working on that. We do have a dedicated physical wellness coordinator, but we see the need and the opportunity that could be hopefully in our future.

Craig Leucke

How long have you had this portion within the wellness center?

Scott Heiss

Approximately about three years.

Craig Leucke

I understand that you had a line-of-duty death last year. How did that section help handle that with the team members involved and the department overall?

Scott Heiss

Well, I dunno if I'd call it a help. I think that when the department was faced with this tragedy, a line of duty death, a member that was extremely loved and cared for and respected within our department, the major portion of grief, that opportunity to go down that road to help our members deal with that grief, that class was a situation that we brought forward so that one of the foremost authorities on grief and really suicide also, the Carson j Spencer Foundation, they partnered with the Denver Fire Department to bring what we call an in-service and talk about and deal with and what the after effects and really what comes about physically as well as mentally and psychologically during grief. And that in-service was the second class of behavioral health that was presented in our department.

Craig Leucke

I understand that you start behavioral health training with recruits all the way through. Is that true? Alright, so have you noticed any benefits from the program that you have running right now?

Scott Heiss

Well, I think the benefit is to realize the situation that behavioral health is as important as physical health and if we bring it to recruits from the very beginning, the opportunity to develop a stigma is not there. The opportunity to realize that it's just as important to be psychologically well to have performance in psychological area as well as top performance physically that makes you the best firefighter. And when we bring our peer support and we bring our department psychologists and we talk to the recruits from the get-go, we have them recognize that it's not if it's when, when you start to think about things that bother you within the fire service and now it should be a situation that that's normal. When you talk to someone or talk to your peers or talk to your peer support or talk to the resources that we have in psychology, performance psychology, that should be the norm, not the situation that you shy away from.

Craig Leucke

Can you go back over the last few years since you've had the program in place, any particular stories that shows a real benefit to either the firefighter or the family involved?

Scott Heiss

Well, the assistant chief that worked at training was one of the pioneers that brought our first portion of behavioral health in service. And this group, FIRE, which was firefighters for incorporated for racial equality, they brought the first Carson J Spencer Foundation class to us as administration. In there, Assistant Chief Manny Al McGarry had several calls after our first suicide prevention in service on how much it helped some individuals. That they were pondering this situation very seriously, and they called him a couple of times and said, Hey, you know what? I just want you to know because that class I did not go down that road. It was an opportunity to learn about resources.

Craig Leucke

From your experience with your own wellness center, what recommendations or advice would you give to other departments that would either have nothing in place or considering something like that?

Scott Heiss

Well, I think the best opportunity is that you have to have a commitment and you have to have a commitment from the top down, but you also have to have a commitment with strong stakeholders such as our union, Local 858, and collaboration with peer support. And another great collaboration is with our local, I'm sorry I already said Local 858 but the FIRE group, the firefighters incorporated for racial equality, they stepped in and also collaborated. And the most important thing that our members told us after the first and second training is that when you have members, training members, then they buy in. Because they see their peers that step up and they're committed to this and see that this opportunity was brought within the department to the department not from the top down, not from the sideways. It was brought from within their group of peers and then they found how important it is and that the stigma, it wasn't gone, but the opportunity for buy-in became evident. The other thing that I think is important is that firefighters will easily talk about physical wellness. They'll easily talk about, I need to see a physical therapist because my shoulder or my back or my knee. But in this case, right here, when it's tied together to say if you want to be the best firefighter at top peak performance, you have to be psychologically top performance as well as physically top performance. And that gives the opportunity to open minds.

Craig Leucke

What advice would you give somebody who feels like they are going through some rough times, bad calls, whether cumulative or single call? What advice would you want to give them for seeking help?

Scott Heiss

Open up. Open up to your firefighting partners. Open up to the resources that your department has. Many departments and people within the departments don't know the resources that they have. The opportunity for training divisions and firefighters across this nation is to understand that there's many, many resources out there. There's many resources that we haven't taken advantage of, and they're there, they're willing to help. And once you start the dialogue, the opportunity for healing begins.

Craig Leucke

Absolutely. The help is definitely out there. Thank you, Chief, for sharing what the Denver Fire Department is doing for the people. We just got to take care of our people so they can serve the public. At this point, I'd like to bring in our expert panel for the series, Patricia Watson, Vickie Taylor, Dr. Richard Gist, Captain Frank Leto, FDNY, and Victor Stagnaro with the National Fallen Firefighters Foundation. Welcome back everybody. Along the lines of clinical support, we've touched on this on previous episodes, Frank, should I expect that someone is going to help me and get me a therapist? I mean, if I go see one on my own, am I crazy?

Frank Leto

I do believe that if it's not done for you, that you have to do it yourself. I mean, this is a big deal. It's your own health and it doesn't mean you're crazy if you're going to a therapist. I mean, I think that's a misconception that a lot of people have. Okay, must be going nuts if I'm going to a therapist. It doesn't mean you're dying, if you go to a doctor. It means you may need some extra level of support. So, I think we have to get rid of the misconceptions. We have to put therapists out there, what they are, what they can do, what they can't do. We have to educate our members. We need to be on our game and this is another tool that we have to be on our game, to be the best firefighters we can be.

Vickie Taylor

It's essentially, a more sophisticated form of problem solving. I love your point about people think, oh, well, I must be crazy if I'm going to therapy. No, it just means that perhaps it would be helpful to have another level of an objective view of problem solving.

Frank Leto

One of the big changes that has happened at FDNY is people are calling up and say, you know what? I'm not being prodded. I think I need to go to counseling. I mean, that didn't happen before. So those conversations are going on. Why do you think you need to go to counseling? That's not my question. If you think you need to go, we're going to try to get you the right match, and if this doesn't work, we're going to find the right person that is a match. So, I think it can change. I think it's not going to change overnight, but it can change for all departments.

Richard Gist

I think one of the things that really distinguishes therapists who are good with a fire population is how they choose to engage, the kinds of techniques they use. Lots of ordinary counseling is based on warm and fuzzy huggy body, kissy face kind of stuff. And that just really doesn't cut it very well with people who are hardcore gung-ho problem solvers. I think Vickie put it real well, they know how they feel. They want to know how to feel some other way and actually work in and jump in and tackle it. So, with the website we built to help people who are working with firefighters, it concentrates on things like cognitive processing therapy, which that's not a name that's going to mean anything to anybody, but here's what it boils down to. It's hardcore, get down there, get your knuckles dirty, fix this thing. And it involves taking it head on instead of kind of pussy footing your way around the edges of it. And the people who are going to provide that therapy have to understand who they're dealing with. And if you're not comfortable approaching the therapy situation that way, it's kind of incumbent ethically on the counselor too to say, you know what? This ain't for me. Let me find you somebody who does this differently.

Victor Stagnaro

Just a thought here too. I think one thing to keep in mind is there's a certain subset of the population that's going to have mental health concerns. There are accountants that go to therapists. They don't see the things that firefighters see. There's lots of people outside emergency response that see therapists for different. So, we're going to have a subset of those firefighters in our organizations, and we still have a responsibility to care for them. So just the fact that, as Vickie pointed out and Frank pointed out, just because you go to a doctor doesn't mean you're going to die. Just because you might have to be on depression medicine, doesn't mean that you're crazy. There are things that just like diabetes, heart disease, there's medications that help us live longer and live healthier, and same set of medications for depression or whatever those, and sometimes it may be permanent, sometimes it's just a temporary thing, but the stigma of using those kinds of things in the fire service seems to be much greater than it may be in the rest of the population or maybe because it's harder to hide those things in the fire service. But I think we need to understand that those things are commonplace in our society and it's not that much different in the fire station.

Frank Leto

Just disseminating that information, Victor, that you spoke about, how many firefighters have come back from have made the step to get help, went to a psychiatrist, got a prescription for an antidepressant, which is a medication that is very effective, and didn't know if they can take it or not. They were sitting with it in their hand, they're clinically depressed and they don't know who to ask if they're allowed to take it. Can I work full duty? Who do I go to? I mean, just getting that information out, what you just spoke about, can save so much heartache and so much sickness that it would be incredible, just that little bit of information.

Patricia Watson

I think it's also important for a provider, whoever you're working with, to understand the strengths that brought you into wanting to be a first responder in the first place. To really understand the strengths of the first responder culture and to also understand that some of those strengths can be directly related to your vulnerabilities as well. So if you're a person who's a problem solver, if you're a person who's the go-to person to help other people, if you're a person who's extremely loyal, who is invested in being strong, if you're a person who's really connected to the people around you, within your setting, those also on the flip side can be vulnerabilities because you're not going to want to admit that there's anything wrong with you. You're not going to want other people to not trust you because they think maybe something is not going okay with you.

When you're out of that setting, where you're surrounded by the people, you're so loyal to and they're loyal to you, then you could be vulnerable, right? So, we see a lot of retirees, at that moment, is when become, they start to reflect. They have time to reflect, and they're not surrounded by the things that gave them meaning and purpose. They're not surrounded by people who have the same values as them. So then, the question is, who am I if I'm not this, right? They've spent their whole life giving to others and being inspired by the people that have surrounded them and what they've been asked to do, and then they get out of that setting. And then it becomes, now what? I think that we need providers who can help people remember their strengths, remember how to and rethink, how to apply those strengths to help themselves because oftentimes those strengths are turned outward instead of inward.

Patricia Watson

And also, to apply those strengths to different phases of their life. So, I'm sorry, not all firefighters are the same in the first five years as they are in the last five years of their career. So how do you use those same strengths, apply them differently at different times, as well as in retirement? And if you've got a provider who knows how to do that, who can really look at the whole person and say, look, you've got a lot to work with here, right? This is not about pathology. This is about being in a situation where it's understandable that you would have some of these stress reactions and injuries, and let's take a look at all the strength that you gained through this experience and the wisdom and figure out how to apply it so that we can work you through this and help you to see the other side, whatever the other side might be.

Craig Leucke

What should a firefighter do immediately if they're considering help?

Richard Gist

I don't know that it matters so much where they start as long as they start. And one of the objectives is making sure that we should be building in the organization. Whoever you reach out to, they can immediately get you into that chain that's going to get you what you need. If you got to figure out who's the one person in this organization I could go to, we're going to miss way too many people. Every one of us is obligated to be that guy.

Frank Leto

And I might reach out to somebody that I really trusted as well, a friend, a family member, clergy. Make it a team effort. If you don't have the organization within your department that you can go straight to help, get other people involved, make connections and get support that way.

Patricia Watson

I would say too, if you're an introvert and you don't have people that you feel like you can reach out to and trust, you could do some of this foundational work on your own where you sit down and just try to reflect on where you are, where you want to be, how you can get from A to B, what are the next two steps that you need to take to get there. And for each person it's going to be different, but you got to kind of start with what's not working and how do I get from here to there?

Vickie Taylor

And once you identify resources that are in your community, within your department, within the area around you, have it easily accessible. So that person that doesn't want to say anything to anybody else can go on your health and wellness site of your department and see, here's five different places you can get help. And here's some people that if you want to, you could reach out to who could help you make a choice of a therapist who might be a good match for what you're looking for. So it narrows it.

Patricia Watson

And for other people, it's not going to be a therapist because they'll never trust a therapist. It might be a peer, a retired first responder, a chaplain, a family member, an online support group, Alcoholics Anonymous, whatever it is for that person. Just somebody that will help them expand their view and their awareness and be able to kind of think things through slightly differently.

Victor Stagnaro

And I think that's huge. You just recognize you don't have to go it alone. There's people who've been down the road and they can help you. If you don't know who they are, you can ask. But even if you're afraid to ask, there's people you can reach out to, whether as Frank said, a chaplain, a loved one, a coworker, someone you respect. I think that's the main thing is to know you don't have to go it alone.

Craig Leucke

You're absolutely right. You never have to go it alone. And it's okay to seek out help in whatever method works for you. I'd like to thank our special guest, Deputy Chief Scott Heiss of the Denver Fire Department for stopping by and as well as our panel, Patricia Watson, Vickie Taylor, Richard Gist, Frank Leto and Victor Stagnaro. Thank you very much panel for helping us out. And you the listener. You can help us out by subscribing, liking, commenting, and sharing this podcast from iTunes or your favorite podcast audio app. Just search for *Checking In*, share it across social media. Everyone can benefit from this podcast series no matter what they're going through right now, everyone can benefit from this. And we sincerely hope everyone goes home. Please remember, if you or someone you know is in need of immediate support, please call the National Suicide Prevention Lifeline, 1-800-273-TALK. That's 1-800-273-8255. I'm your host, Craig Leucke, and we'll see you on the next *Checking In*.